



UNITED STATES DISTRICT COURT
DISTRICT OF ARIZONA

United States of America,
Plaintiff,
v.

1. Angelo Chirban,
dba ATEN Corporation,
(Counts 1-128, 130)
2. Marilyn Chirban,
dba ATEN Corporation,
(Counts 1-129)
Defendants.

CR '11 24 16 PHX GMS DKO
No.

INDICTMENT

VIO: 21 U.S.C. § 846
(Conspiracy to Illegally
Distribute Controlled
Substances)
Count 1

21 U.S.C. §§ 841(a)(1) and
841(b)(1)(C)
(Illegal Distribution of
Controlled Substances)
Counts 2-45

18 U.S.C. § 1349
(Health Care Fraud Conspiracy)
Count 46

18 U.S.C. § 1347
(Health Care Fraud)
Counts 47-128

18 U.S.C. § 1957(a)
(Transactional Money
Laundering)
Counts 129-130

18 U.S.C. §§ 981(a)(1)(C),
982(a)(1), 982(a)(7), and 21
U.S.C. § 853
(Criminal Forfeiture)

THE GRAND JURY CHARGES:

INTRODUCTION

At all times material to this Indictment:

1. Beginning on or about June 2, 2003, and continuing up to and including on or about April 28, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN owned and operated a business known as "ATEN Corporation." Defendants ANGELO CHIRBAN and MARILYN CHIRBAN were the two directors of the corporation. Defendant ANGELO CHIRBAN was the President of ATEN Corporation and Defendant MARILYN CHIRBAN was the Vice-President, Secretary, and Treasurer of ATEN Corporation.

2. Defendants ANGELO CHIRBAN and MARILYN CHIRBAN, through ATEN Corporation, owned and operated "pain management" clinics.

3. Between on or about June 2003 and on or about March 12, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN owned and operated the Phoenix Pain Management Center (hereafter "PPMC") located at 17233 North Holmes Boulevard, Phoenix, Arizona. Between on or about March 1, 2004 and on or about March 12, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN owned and operated the Mesa Pain Management Center (hereafter "MPMC") located at 777 West Southern Avenue, Mesa, Arizona. Between on or about March 16, 2010, and on or about April 28, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN owned and operated the Scottsdale Pain Management Center (hereafter "SPMC") located at 3337 North Miller Road, Scottsdale, Arizona. The PPMC, MPMC, and SPMC (collectively, "the Clinics") were located in the District of Arizona.

4. Defendant ANGELO CHIRBAN was a medical doctor licensed in the state of Arizona. On or about December 2, 1987, the Drug Enforcement Administration ("DEA") issued registration #AC3104875 to ANGELO CHIRBAN, authorizing him to dispense controlled substances following the guidelines and rules set forth in the Controlled Substances Act ("CSA") and Code of Federal Regulations ("CFR").

1 5. Defendant MARILYN CHIRBAN was not a medical doctor and did not possess
2 any medical or nursing certifications. The DEA had not issued a registration to MARILYN
3 CHIRBAN that would authorize her to dispense controlled substances.

4 6. In addition to being the principal owners responsible for the operation of the
5 PPMC, MPMC, and SPMC, Defendant ANGELO CHIRBAN treated patients at the clinics and
6 Defendant MARILYN CHIRBAN was the office manager and administrator of the clinics.
7 Defendants ANGELO CHIRBAN and MARILYN CHIRBAN employed nurse practitioners and
8 physician assistants at the clinics who were also authorized by the DEA to dispense controlled
9 substances.

10 7. Pursuant to Title 21, Code of Federal Regulations, Section 1306.04, prescriptions
11 for controlled substances are effective only if they are issued for a legitimate medical purpose
12 by a practitioner acting in the usual course of professional practice. The prescribing practitioner
13 is responsible for proper prescribing and dispensing of controlled substances.

14 8. Beginning in or about January 2008, Defendants MARILYN CHIRBAN and
15 ANGELO CHIRBAN did knowingly and intentionally conspire and agree together, and with
16 other individuals and entities known and unknown to the Grand Jury, to issue prescriptions for
17 controlled substances outside of the usual course of professional practice. MARILYN
18 CHIRBAN, who was not a medical practitioner acting in the usual course of professional
19 practice, signed more than two thousand prescriptions for controlled substances including
20 oxycodone, morphine, methadone, hydrocodone, fentanyl, and hydromorphone in ANGELO
21 CHIRBAN's name. Defendant ANGELO CHIRBAN knew and was aware that MARILYN
22 CHIRBAN was prescribing controlled substances using his name and DEA registration number.
23 Although many of the patients for whom MARILYN CHIRBAN issued controlled substances
24 did not see a medical professional prior to receiving their prescription, ANGELO CHIRBAN
25 and MARILYN CHIRBAN caused bills for office visits for those patients to be submitted to the
26 Arizona Health Care Cost Containment System (hereafter "AHCCCS"), the Arizona Medicaid
27 program, in ANGELO CHIRBAN's name.

General Terminology

9. The CSA governs the manufacture, distribution, and dispensation of controlled substances in the United States. The CSA and the CFR contain definitions relevant to this Indictment, some of which are set forth below.

10. The term “controlled substance” means a drug or other substance, or immediate precursor, included in Schedule I, II, III, IV, and V as designated by Title 21 of the United States Code, Sections 812, 802(c)(6), and the CFR.

11. The term “Schedule II” means the drug or other substance: (1) has a high potential for abuse; (2) has a currently accepted medical use in treatment in the United States or currently accepted medical use with severe restrictions, and (3) abuse of the drug may lead to severe psychological or physical dependence. A comprehensive list of these drugs was set forth in Title 21, Code of Federal Regulations, Section 1308.12. Pursuant to that list, and at all times relevant to this Indictment, Oxycodone (commonly marketed under such trade names as OxyContin and Percocet), Morphine (commonly marketed under trade names such as MS Contin and Morphine Sulfate IR or “MSIR”), Methadone (commonly marketed under trade names such as Dolophine and Methadose), Fentanyl, and Hydromorphone (commonly marketed under trade names such as Dilaudid), were among the controlled substances classified as Schedule II.

12. The term “dispense” means to deliver a controlled substance to an ultimate user or research subject by, or pursuant to the lawful order of, a practitioner, including the prescribing and administering of a controlled substance.

13. The term “distribute” means to deliver (other than by administering or dispensing) a controlled substance.

14. The term “deliver” or “delivery” means the actual, constructive or attempted transfer of a controlled substance.

15. The term “practitioner” means a physician or other person licensed, registered, or otherwise permitted by the United States or the jurisdiction in which he practiced to distribute or dispense a controlled substance in the course of professional practice.

(Conspiracy to Illegally Distribute Controlled Substances)
21 U.S.C. §§ 846

18. Beginning on a date unknown to the grand jury, but no later than on or about January 2, 2008, and continuing until on or about April 28, 2010, in the District of Arizona and elsewhere, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN did knowingly and intentionally conspire and agree together, and with other individuals and entities known and unknown to the Grand Jury, to distribute and dispense, and to cause to be distributed and dispensed, mixtures of substances containing detectable amounts of the following controlled substances, not in the usual course of professional practice and not for a legitimate medical purpose: Oxycodone, Morphine, Methadone, Fentanyl, and Hydrocodone, all Schedule II controlled substances, in violation of Title 21, United States Code, Sections 841(a)(1) and (b)(1)(C).

19 19. The purpose of the conspiracy included, but was not limited to, making as much
20 money as possible by causing the illegal distribution and dispensing of controlled substances,
21 including Schedule II controlled substances such as Oxycodone, Morphine, Methadone,
22 Fentanyl, and Hydrocodone, to patients, other drug users, and co-conspirators.

24 20. During the course of the conspiracy, the Clinics were usually open on weekdays
25 from approximately 8:00 a.m. to 6:00 p.m. Defendant ANGELO CHIRBAN spent certain days
26 of the week at the PPMC and certain days of the week at the MPMC from on or about January
27 2, 2008 up until on or about March 12, 2010, the time period when both clinics were open.

1 Defendant ANGELO CHIRBAN saw between approximately four and ten patients per day when
2 he was at the Clinics. Defendant MARILYN CHIRBAN was responsible for the operation of
3 the PPMC and the MPMC from on or about January 2, 2008 up until on or about March 12,
4 2010, but spent most of her time at the PPMC.

5 21. Defendants ANGELO CHIRBAN and MARILYN CHIRBAN employed varying
6 numbers of nurse practitioners and physician assistants to see patients at the Clinics also.
7 Defendants ANGELO CHIRBAN and MARILYN CHIRBAN expected nurse practitioners and
8 physician assistants to see at least three patients per hour, and paid nurse practitioners and
9 physician assistants a bonus of \$20.00 for each patient seen above three patients per hour or
10 thirty patients per day.

11 22. Defendant MARILYN CHIRBAN routinely scheduled more patients to see
12 medical providers than the medical providers could reasonably and professionally treat in one
13 day. Patients frequently waited in the Clinics' waiting rooms and parking lots for multiple hours
14 in order to see a medical provider or receive a prescription.

15 23. Between on or about April 1, 2008 and on or about April 28, 2010, approximately
16 32,044 prescriptions for controlled substances were issued using the name and DEA registration
17 number of Defendant ANGELO CHIRBAN.

18 24. Between on or about January 2, 2008, and on or about April 28, 2010, Defendants
19 ANGELO CHIRBAN and MARILYN CHIRBAN billed AHCCCS as though Defendant
20 ANGELO CHIRBAN had personally seen approximately 2,809 patients in approximately 36,321
21 separate claims. Of these claims, approximately 33,928 were coded as though Defendant
22 ANGELO CHIRBAN had personally performed an office visit of approximately 25 minutes, and
23 approximately 1,203 were coded as though Defendant ANGELO CHIRBAN had personally
24 performed an office visit of approximately 40 minutes.

25 25. It was part of the conspiracy that when medical providers were unable to see
26 patients and at other times, Defendant MARILYN CHIRBAN would sign Defendant ANGELO
27 CHIRBAN's name on prescriptions, including prescriptions for Schedule II controlled
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1 substances, such as Oxycodone, Morphine, Methadone, Fentanyl, and Hydrocodone. Defendant
2 ANGELO CHIRBAN left blank prescription pads in common areas, enabling Defendant
3 MARILYN CHIRBAN to sign his name on prescriptions for Schedule II controlled substances.

4 26. It was part of the conspiracy that Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN required or strongly encouraged patients to have these prescriptions
6 filled at specific pharmacies located next door to the PPMC and MPMC, and gave these
7 pharmacies keys to enable access to the PPMC and MPMC. These pharmacies filled
8 prescriptions for Schedule II controlled substances signed by Defendants MARILYN CHIRBAN
9 and ANGELO CHIRBAN regardless of the style of the signature on the prescription, regardless
10 of the name signed on the prescription, regardless of whether Defendant ANGELO CHIRBAN
11 was physically present at the Clinics on the days the prescriptions were written, and regardless
12 of whether any signature was on the prescription at all.

13 27. It was part of the conspiracy that when a patient saw a nurse practitioner or a
14 physician assistant, and when a patient saw no provider at all but was instead provided a
15 prescription by Defendant MARILYN CHIRBAN, that Defendants MARILYN CHIRBAN and
16 ANGELO CHIRBAN would bill insurance programs as though the patients had received a
17 detailed office visit with Defendant ANGELO CHIRBAN himself.

18 28. It was part of the conspiracy that for patients who were issued a prescription for
19 a Schedule II narcotic without having seen a medical professional, Defendants MARILYN
20 CHIRBAN and ANGELO CHIRBAN hired individuals to create and complete medical charts
21 after the fact, falsely making the chart appear as though the patient had seen a medical
22 professional during previous visits in order to justify the issuance of prescriptions and insurance
23 billing for the visit. It was further part of the conspiracy that Defendant ANGELO CHIRBAN
24 permitted a stamp of his signature to be used on certain of these charts, making it appear as
25 though he had personally seen the patient.

26 29. It was part of the conspiracy that when a nurse practitioner filed a complaint with
27 the Arizona Medical Board in or about July 2009, alleging that Defendant MARILYN
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1 CHIRBAN had been signing prescriptions, Defendant ANGELO CHIRBAN claimed that
2 Defendant MARILYN CHIRBAN never had authority to sign prescriptions and had been
3 "immediately terminated" from the office, when in fact, Defendant MARILYN CHIRBAN
4 continued to work full-time at the office until on or about April 28, 2010. It was also part of the
5 conspiracy that at some time after on or about July 22, 2009, Defendant ANGELO CHIRBAN
6 personally signed new copies of prescriptions dated after July 22, 2009 that had originally been
7 issued fraudulently using his DEA registration number. It was further part of the conspiracy that
8 Defendant ANGELO CHIRBAN pre-signed blank prescription pads and permitted Defendant
9 MARILYN CHIRBAN to fill out medication information and issue those prescriptions when he
10 was not present in the Clinics.

11 30. Between on or about January 2, 2008 and on or about April 28, 2010, Defendants
12 ANGELO CHIRBAN and MARILYN CHIRBAN conspired to issue more than 2,400
13 prescriptions for Oxycodone outside of the usual course of professional practice and not for a
14 legitimate medical purpose, therein distributing at least 7,100 grams of Oxycodone.

15 31. Between on or about January 2, 2008 and on or about April 28, 2010, Defendants
16 ANGELO CHIRBAN and MARILYN CHIRBAN conspired to issue more than 1,800
17 prescriptions for Morphine outside of the usual course of professional practice and not for a
18 legitimate medical purpose, therein distributing at least 7,700 grams of Morphine.

19 32. Between on or about January 2, 2008 and on or about April 28, 2010, Defendants
20 ANGELO CHIRBAN and MARILYN CHIRBAN conspired to issue more than 300
21 prescriptions for Methadone outside of the usual course of professional practice and not for a
22 legitimate medical purpose, therein distributing at least 1,400 grams of Methadone.

23 33. Between on or about January 2, 2008 and on or about April 28, 2010, Defendants
24 ANGELO CHIRBAN and MARILYN CHIRBAN conspired to issue more than 300
25 prescriptions for Fentanyl outside of the usual course of professional practice and not for a
26 legitimate medical purpose, therein distributing at least 261 milligrams of Fentanyl.

34. Between on or about January 2, 2008 and on or about April 28, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN conspired to issue more than 30 prescriptions for Hydromorphone outside of the usual course of professional practice and not for a legitimate medical purpose, therein distributing at least 16 grams of Hydromorphone.

In violation of Title 21, United States Code, Section 846.

COUNTS 2-45

(Illegally Distributing Controlled Substances; Aiding and Abetting)
21 U.S.C. §§ 841(a)(1), 841(b)(1)(C), 18 U.S.C. § 2

35. The factual allegations of paragraphs 1 through 34 are re-alleged and incorporated herein by reference.

36. On or about the dates specified below, in the District of Arizona and elsewhere, the defendants, ANGELO CHIRBAN and MARILYN CHIRBAN, directly, conspiratorially, and aiding and abetting each other, and other individuals and entities both known and unknown to the Grand Jury, did knowingly and intentionally distribute and cause to be distributed dosage units of the below-listed Schedule II controlled substances; said acts of distribution were not in the course of usual professional practice and were not for a legitimate medical purpose.

AS TO PATIENT #1001(MB) (COUNTS 2-4)

COUNT	DATE	DRUG	STRENGTH/NUMBER
2	October 6, 2008	Oxycodone (Percocet)	5 mg./180
3	December 2, 2008	Oxycodone (Percocet)	5 mg./180
4	August 17, 2009	Oxycodone (Percocet)	5 mg./180

AS TO PATIENT #1002(PB) (COUNTS 5-10)

COUNT	DATE	DRUG	STRENGTH/NUMBER
5	August 28, 2009	Morphine (MS Contin)	30 mg./60
6	August 28, 2009	Oxycodone (Percocet)	5 mg./36
7	December 22, 2009	Morphine (MS Contin)	60 mg./60

8	December 22, 2009	Oxycodone (Percocet)	10 mg./180
9	February 23, 2009	Morphine (MS Contin)	60 mg./60
10	February 23, 2009	Oxycodone (Percocet)	10 mg./180

AS TO PATIENT #1003(RD) (COUNTS 11-18)

COUNT	DATE	DRUG	STRENGTH/NUMBER
11	October 31, 2008	Oxycodone (Percocet)	5 mg./150
12	October 31, 2008	Morphine (MS Contin)	100 mg./60
13	July 17, 2009	Oxycodone (Percocet)	5 mg./180
14	July 17, 2009	Morphine (MS Contin)	100 mg./60
15	September 15, 2009	Oxycodone (Percocet)	5 mg./180
16	September 15, 2009	Morphine (MS Contin)	100 mg./60 and 30 mg./60
17	March 4, 2010	Oxycodone (Percocet)	100 mg./60
18	March 4, 2010	Morphine (MS Contin)	100 mg./60 and 30 mg./60

AS TO PATIENT #1004(DR) (COUNTS 19-24)

COUNT	DATE	DRUG	STRENGTH/NUMBER
19	November 25, 2008	Morphine (MS Contin)	30 mg./60 and 15 mg./60
20	November 25, 2008	Morphine (MSIR)	15 mg./120
21	December 23, 2008	Morphine (MS Contin)	30 mg./60 and 15 mg./60
22	December 23, 2008	Morphine (MSIR)	15 mg./120
23	September 25, 2009	Morphine (MS Contin)	30 mg./60 and 15 mg./60
24	September 25, 2009	Morphine (MSIR)	15 mg./120

AS TO PATIENT #1005(KS) (COUNTS 25-27)

COUNT	DATE	DRUG	STRENGTH/NUMBER
25	July 20, 2009	Oxycodone	15 mg./120
26	August 18, 2009	Oxycodone	15 mg./120
27	September 16, 2009	Oxycodone	15 mg./120

AS TO PATIENT #1006(DH) (COUNTS 28-31)

COUNT	DATE	DRUG	STRENGTH/NUMBER
28	July 20, 2009	Morphine (MS Contin)	30 mg./60 and 15 mg./60
29	July 20, 2009	Morphine (MSIR)	15 mg./90
30	August 18, 2009	Morphine (MS Contin)	30 mg./60 and 15 mg./60
31	August 18, 2009	Morphine (MSIR)	15 mg./90

AS TO PATIENT #1007(SO) (COUNTS 32-33)

COUNT	DATE	DRUG	STRENGTH/NUMBER
32	October 2, 2009	Oxycodone (Oxycontin)	80 mg./120 and 40 mg./60
33	October 2, 2009	Oxycodone	15 mg./150

AS TO PATIENT #1008(MS) (COUNTS 34-35)

COUNT	DATE	DRUG	STRENGTH/NUMBER
34	December 3, 2008	Methadone	10 mg./870
35	September 10, 2009	Methadone	10 mg./870
36	October 9, 2009	Methadone	10 mg./406

AS TO PATIENT #1009(DB) (COUNTS 37-40)

COUNT	DATE	DRUG	STRENGTH/NUMBER
37	August 28, 2008	Morphine (MS Contin)	100 mg./60
38	November 12, 2008	Morphine (MSIR)	30 mg./28
39	June 25, 2009	Morphine (MS Contin)	30 mg./60
40	June 25, 2009	Morphine (MSIR)	15 mg./90

AS TO PATIENT #1010(SV) (COUNTS 41-45)

COUNT	DATE	DRUG	STRENGTH/NUMBER
41	October 31, 2008	Morphine (MS Contin)	100 mg./120
42	October 31, 2008	Morphine	30 mg./60

43	October 31, 2008	Oxycodone	30 mg./150
44	October 9, 2009	Morphine (MS Contin)	100 mg./120
45	October 9, 2009	Oxycodone	30 mg./60

In violation of Title 21, United States Code, Sections 841(a)(1) and (b)(1)(C).

COUNT 46

**(Health Care Fraud Conspiracy)
18 U.S.C. §§ 1349, 1347**

37. The factual allegations of paragraphs 1 through 36 are re-alleged and incorporated herein by reference.

38. Beginning on or about September 20, 2006, and continuing until on or about April 28, 2010, in the District of Arizona and elsewhere, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN, and other individuals and entities, both known and unknown to the Grand Jury, individually and through businesses known as ATEN Corporation and Phoenix Pain Management Center, did knowingly and willfully conspire and agree together to commit health care fraud in violation of Title 18, United States Code, Section 1347.

The Victim Health Care Program

39. Defendants ANGELO CHIRBAN and MARILYN CHIRBAN caused to be submitted bills to the AHCCCS program, Arizona's Medicaid program. AHCCCS is jointly funded by the federal government and the State of Arizona. AHCCCS qualifies as a Health Care benefit program within the meaning of Title 18, United States Code, Section 24(b). AHCCCS provides medical assistance to indigent individuals and is more specifically described in "Attachment A," which is incorporated into this Indictment and serves as the Fed. R. Crim. P. 12.4 Disclosure Statement describing the victim.

40. AHCCCS uses a billing process to establish the validity of health care claims. Individuals intending to treat patients covered under the AHCCCS program are required to register as AHCCCS providers and agree to comply with AHCCCS policies and procedures for

1 provider participation. Some of those policies are detailed in the Fee-For-Service Provider
2 Manual. When a health care provider has registered with AHCCCS, they receive a unique
3 provider identifier number (“provider ID number”). AHCCCS providers must also abide by the
4 terms of the CFR. Specifically, 42 C.F.R. §§ 455.18 requires that, when submitting a claim to
5 AHCCCS, a provider certify that he is providing “true, accurate, and complete information,” that
6 he understands that payment will be made from federal and state funds, and that any falsification
7 or concealment of a material fact may be prosecuted under Federal and State laws.

8 41. The AHCCCS Fee-For-Service Provider Manual specifies how fee-for-service
9 providers such as pain management clinics may submit claims to receive payment for health care
10 services rendered. The Fee-For-Service Provider Manual states that each physician and mid-
11 level practitioner—which includes registered nurse practitioners and physician assistants—must
12 register with AHCCCS and bill for services under their own unique provider ID number. Clinics
13 may register for “group billing” so that they can jointly bill for services provided by all of the
14 physicians and mid-level practitioners at the clinic, but “group bills” must still include the
15 provider ID number of the physician or mid-level practitioner that actually provided the services,
16 along with the clinic’s group billing ID number.

17 42. AHCCCS will not reimburse providers who have not registered to be able to treat
18 patients under the AHCCCS program, and who therefore do not have a provider ID number.
19 AHCCCS will reimburse physician assistants and nurse practitioners who have previously
20 registered with AHCCCS and have a provider ID number at 90 per cent of the AHCCCS capped
21 fee or billed charges, whichever is less. AHCCCS will not reimburse providers for services that
22 have not actually been provided to the patient.

23 MANNER AND MEANS OF THE CONSPIRACY

24 43. Defendant ANGELO CHIRBAN registered with AHCCCS and received a
25 provider ID number (# 445438) that authorized him to treat AHCCCS patients beginning on or
26 about October 27, 1998. Defendant ANGELO CHIRBAN was also registered to bill AHCCCS
27 under a Phoenix Pain Management group billing provider ID number (# 451661) beginning on
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1 or about January 1, 2008. Defendant ANGELO CHIRBAN was the only health care provider
2 authorized to bill under the Phoenix Pain Management group provider ID number; no nurse
3 practitioners or physician assistants were associated with that group billing provider ID number.
4 When Defendant ANGELO CHIRBAN registered with AHCCCS, he signed a Provider
5 Agreement in which he agreed to file all claims in accordance with applicable Federal and State
6 laws and the AHCCCS Fee-For-Service Billing Manual.

7 44. As the office administrator for the Clinics, Defendant MARILYN CHIRBAN
8 developed billing procedures for the Clinics and submitted claims for Defendant ANGELO
9 CHIRBAN's medical services to AHCCCS.

10 45. AHCCCS sent all payments from claims submitted by Defendant ANGELO
11 CHIRBAN and Phoenix Pain Management by check to Defendant ANGELO CHIRBAN and
12 Phoenix Pain Management.

13 46. Beginning on a date unknown to the Grand Jury, but no later than on or about
14 September 20, 2006 and continuing up to and including on or about April 28, 2010, Defendants
15 ANGELO CHIRBAN and MARILYN CHIRBAN employed various health professionals,
16 including nurse practitioners and physician assistants, to work at the Clinics. The number of
17 nurse practitioners and physician assistants employed at any given time varied between two and
18 six. Nurse practitioners are authorized to treat pain management patients and prescribe narcotic
19 medications without the supervision of a medical doctor. Physician assistants are also authorized
20 to treat pain management patients, but must be supervised by a medical doctor in order to
21 prescribe narcotic medications.

22 47. The nurse practitioners and physician assistants employed by Defendants
23 ANGELO CHIRBAN and MARILYN CHIRBAN treated the majority of patients at the Clinics.
24 Defendants ANGELO CHIRBAN and MARILYN CHIRBAN expected each nurse practitioner
25 and physician assistant to treat at least 24-30 patients per day. In contrast, Defendant ANGELO
26 CHIRBAN usually treated between four and ten patients per day.

1 48. Regardless of whether a nurse practitioner or physician assistant had actually
2 treated the patient, Defendants MARILYN CHIRBAN and ANGELO CHIRBAN fraudulently
3 submitted claims to AHCCCS under Defendant ANGELO CHIRBAN's provider ID number or
4 the Phoenix Pain Management provider ID number, which falsely listed Defendant ANGELO
5 CHIRBAN as the only provider. When submitting medical claims, Defendants ANGELO
6 CHIRBAN and MARILYN CHIRBAN did not identify the provider ID number of the health
7 care provider who actually provided treatment to the patient. Because Defendants ANGELO
8 CHIRBAN and MARILYN CHIRBAN fraudulently did not identify the actual treatment
9 provider on the submitted claims, the records that Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted to AHCCCS made it falsely appear as though Defendant
11 ANGELO CHIRBAN himself had treated each patient. Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN thereby fraudulently obtained payment at the 100 per cent
13 reimbursement level, rather than the 90 per cent reimbursement level applicable to services
14 provided by nurse practitioners and physician assistants, and also fraudulently obtained payments
15 from AHCCCS for services provided by health care providers who were not registered to treat
16 AHCCCS patients at the Clinics.

17 49. Even more egregious fraud occurred in situations where a patient did not see a
18 health care provider at all, but instead just received a prescription from Defendant MARILYN
19 CHIRBAN without an office visit. In those instances, Defendants MARILYN CHIRBAN and
20 ANGELO CHIRBAN fraudulently submitted claims to AHCCCS for office visits as though
21 Defendant ANGELO CHIRBAN had personally seen and treated these patients.

22 50. Between on or about September 20, 2006 and on or about April 28, 2010,
23 Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted claims for
24 approximately 57,431 patient visits to AHCCCS. All of these patient visits were billed as
25 though Defendant ANGELO CHIRBAN himself had treated the patient. Approximately 96
26 percent of the visits were falsely billed as if Defendant ANGELO CHIRBAN had performed an
27 extensive visit of approximately 25-40 minutes. Defendants ANGELO CHIRBAN and
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MARILYN CHIRBAN received approximately \$4,656,859.30 from AHCCCS as a result of these fraudulent claims.

OVERT ACTS IN FURTHERANCE OF THE CONSPIRACY

51. In furtherance of the aforesaid conspiracy and scheme and artifice to defraud, and to effect the objects of the conspiracy, the defendants and others performed and caused to be performed, among others, the following overt acts:

(1) On or about May 13, 2008, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB (ID # A128----7) in the amount of \$199.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

(2) On or about July 10, 2008, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB (ID # A128----7) in the amount of \$199.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

(3) On or about September 5, 2008, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB (ID # A128----7) in the amount of \$199.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

(4) On or about December 1, 2008, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB (ID # A128----7) in the amount of \$199.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

1 (5) On or about February 23, 2009, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
3 (ID # A128----7) in the amount of \$199.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient did not receive an office
5 visit.

6 (6) On or about March 24, 2009, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
8 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (7) On or about April 22, 2009, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
13 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (8) On or about June 3, 2009, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
18 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (9) On or about July 1, 2009, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
23 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
25 practitioner.

26 (10) On or about July 30, 2009, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
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1 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
3 practitioner.

4 (11) On or about February 22, 2010, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
6 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (12) On or about March 22, 2010, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary PB
11 (ID # A128----7) in the amount of \$250.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (13) On or about January 25, 2007, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
16 (ID # A535----4) in the amount of \$225.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a physician
18 assistant.

19 (14) On or about February 22, 2007, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
21 (ID # A535----4) in the amount of \$225.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a physician
23 assistant.

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1 (15) On or about March 8, 2007, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
3 (ID # A535----4) in the amount of \$225.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a physician
5 assistant.

6 (16) On or about March 22, 2007 Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
8 (ID # A535----4) in the amount of \$225.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a physician
10 assistant.

11 (17) On or about May 12, 2008, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
13 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (18) On or about July 9, 2008, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
18 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (19) On or about August 6, 2008, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
23 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
25 practitioner.

26 (20) On or about September 4, 2008, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
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1 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
3 practitioner.

4 (21) On or about October 3, 2008, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
6 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (22) On or about December 1, 2008, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
11 (ID # A535----4) in the amount of \$199.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (23) On or about January 26, 2009, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
16 (ID # A535----4) in the amount of \$225.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
18 practitioner.

19 (24) On or about February 23, 2009, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
21 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
23 practitioner.

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1 (25) On or about March 24, 2009, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
3 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (26) On or about April 22, 2009, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
8 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (27) On or about May 20, 2009, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
13 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (28) On or about June 18, 2009, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
18 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (29) On or about September 15, 2009, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
23 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient, when, in fact, the patient did not receive an office
25 visit.

26 (30) On or about December 8, 2009, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
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1 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
3 practitioner.

4 (31) On or about January 7, 2010, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
6 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (32) On or about February 4, 2010, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
11 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (33) On or about April 1, 2010, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary RD
16 (ID # A535----4) in the amount of \$250.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
18 practitioner.

19 (34) On or about January 28, 2009, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
21 (ID # A236----6) in the amount of \$225.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
23 practitioner.

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1 (35) On or about March 27, 2009, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
3 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (36) On or about April 24, 2009, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
8 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (37) On or about May 22, 2009, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
13 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (38) On or about June 19, 2009, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
18 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (39) On or about July 20, 2009, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
23 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient, when, in fact, the patient did not receive an office
25 visit.

26 (40) On or about August 18, 2009, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
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1 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient, when, in fact, the patient did not receive an office
3 visit.

4 (41) On or about January 11, 2010, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
6 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (42) On or about March 8, 2010, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DH
11 (ID # A236----6) in the amount of \$250.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (43) On or about February 5, 2007, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
16 (ID # A530----1) in the amount of \$225.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
18 practitioner.

19 (44) On or about February 20, 2007, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
21 (ID # A530----1) in the amount of \$225.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
23 practitioner.

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1 (45) On or about March 20, 2007, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
3 (ID # A530----1) in the amount of \$225.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (46) On or about May 15, 2008, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
8 (ID # A530----1) in the amount of \$199.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (47) On or about June 13, 2008, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
13 (ID # A530----1) in the amount of \$199.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (48) On or about October 1, 2008, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
18 (ID # A530----1) in the amount of \$199.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (49) On or about November 25, 2008, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
23 (ID # A530----1) in the amount of \$199.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient did not receive an office
25 visit.

26 (50) On or about December 23, 2008, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
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1 (ID # A530----1) in the amount of \$199.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient did not receive an office
3 visit.

4 (51) On or about January 21, 2009, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
6 (ID # A530----1) in the amount of \$225.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (52) On or about March 3, 2009, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
11 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (53) On or about May 5, 2009, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
16 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen an Advanced
18 Practice Registered Nurse.

19 (54) On or about June 2, 2009, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
21 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen an Advanced
23 Practice Registered Nurse.

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1 (55) On or about July 1, 2009, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
3 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (56) On or about July 30, 2009, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
8 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (57) On or about September 25, 2009, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DR
13 (ID # A530----1) in the amount of \$250.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient, when, in fact, the patient did not receive an office
15 visit.

16 (58) On or about September 20, 2006, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
18 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (59) On or about November 27, 2006, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
23 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
25 practitioner.

26 (60) On or about January 18, 2007, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
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1 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
3 practitioner.

4 (61) On or about February 19, 2007, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
6 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (62) On or about April 19, 2007, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
11 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (63) On or about May 17, 2007, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
16 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
18 practitioner.

19 (64) On or about June 14, 2007, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
21 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
23 practitioner.

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1 (65) On or about August 8, 2007, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
3 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (66) On or about September 5, 2007, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
8 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (67) On or about October 1, 2007, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
13 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
15 practitioner.

16 (68) On or about October 31, 2007, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
18 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (69) On or about November 30, 2007, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
23 (ID # 001----3) in the amount of \$225.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
25 practitioner.

26 (70) On or about March 24, 2008, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
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1 (ID # 001----3) in the amount of \$199.00 for an office visit, billed as though Defendant
2 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
3 practitioner.

4 (71) On or about April 23, 2008, Defendants ANGELO CHIRBAN and
5 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
6 (ID # 001----3) in the amount of \$199.00 for an office visit, billed as though Defendant
7 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
8 practitioner.

9 (72) On or about February 2, 2009, Defendants ANGELO CHIRBAN and
10 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
11 (ID # 001----3) in the amount of \$199.00 for an office visit, billed as though Defendant
12 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
13 practitioner.

14 (73) On or about February 17, 2009, Defendants ANGELO CHIRBAN and
15 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
16 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
17 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
18 practitioner.

19 (74) On or about March 17, 2009, Defendants ANGELO CHIRBAN and
20 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
21 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
22 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
23 practitioner.

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1 (75) On or about April 15, 2009, Defendants ANGELO CHIRBAN and
2 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
3 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
4 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
5 practitioner.

6 (76) On or about April 30, 2009, Defendants ANGELO CHIRBAN and
7 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
8 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
9 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
10 practitioner.

11 (77) On or about June 25, 2009, Defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
13 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
14 ANGELO CHIRBAN had seen the patient when, in fact, the patient did not receive an office
15 visit.

16 (78) On or about July 24, 2009, Defendants ANGELO CHIRBAN and
17 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
18 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
19 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
20 practitioner.

21 (79) On or about October 20, 2009, Defendants ANGELO CHIRBAN and
22 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
23 (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant
24 ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse
25 practitioner.

26 (80) On or about November 17, 2009, Defendants ANGELO CHIRBAN and
27 MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB
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(ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

(81) On or about January 15, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

(82) On or about February 12, 2010, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN submitted a false and fraudulent claim to AHCCCS for beneficiary DB (ID # 001----3) in the amount of \$250.00 for an office visit, billed as though Defendant ANGELO CHIRBAN had seen the patient when, in fact, the patient had seen a nurse practitioner.

In violation of Title 18, United States Code, Section 1349.

COUNTS 47-128

**(Health Care Fraud)
18 U.S.C. § 1347**

52. The factual allegations of paragraphs 1 through 51 are re-alleged and incorporated herein by reference.

53. From on or about September 20, 2006 to on or about April 28, 2010, in the District of Arizona and elsewhere, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN, and other individuals and entities, both known and unknown to the Grand Jury, individually and through businesses known as ATEN Corporation and Phoenix Pain Management Center, did knowingly and willfully execute, and attempt to execute, a scheme and artifice to defraud a health care benefit program, and for obtaining money and property under the custody and control of a health care benefit program, by means of false and fraudulent pretenses, representations and promises.

54. On or about the following dates, Defendants ANGELO CHIRBAN and MARILYN CHIRBAN, and others individuals and entities known and unknown to the Grand Jury, did, for the purpose of executing and attempting to execute the scheme and artifice to defraud a health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services, knowingly and willfully submitted the following false and fraudulent claims:

AS TO PATIENT # 1002(PB) (AHCCCS ID # A128----7) (COUNTS 47-58)

COUNT	DATE OF SERVICE	NATURE OF FALSE REPRESENTATION	BILLED AMOUNT	PAID AMOUNT
47	5/13/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
48	7/10/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
49	9/5/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
50	12/1/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
51	2/23/2009	Claims patient received office visit	\$250.00	\$84.96
52	3/24/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
53	4/22/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
54	6/3/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
55	7/1/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
56	7/30/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
57	2/22/2010	Lists Provider ID as # 445438	\$250.00	\$84.96
58	3/22/2010	Lists Provider ID as # 445438	\$250.00	\$84.96

AS TO PATIENT # 1003(RD) (AHCCCS ID # A535----4) (COUNTS 59-79)

COUNT	DATE OF SERVICE	NATURE OF FALSE REPRESENTATION	BILLED AMOUNT	PAID AMOUNT
59	1/25/2007	Lists Provider ID as # 445438	\$225.00	\$118.27
60	2/22/2007	Lists Provider ID as # 445438	\$225.00	\$118.27
61	3/8/2007	Lists Provider ID as # 445438	\$225.00	\$118.27
62	3/22/2007	Lists Provider ID as # 445438	\$225.00	\$118.27

63	5/12/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
64	7/9/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
65	8/6/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
66	9/4/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
67	10/3/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
68	12/1/2008	Lists Provider ID as # 445438	\$199.00	\$81.45
69	1/26/2009	Lists Provider ID as # 445438	\$225.00	\$118.27
70	2/23/2009	Lists Provider ID as # 445438	\$250.00	\$81.45
71	3/24/2009	Lists Provider ID as # 445438	\$250.00	\$81.45
72	4/22/2009	Lists Provider ID as # 445438	\$250.00	\$81.45
73	5/20/2009	Lists Provider ID as # 445438	\$250.00	\$82.61
74	6/18/2009	Lists Provider ID as # 445438	\$250.00	\$82.61
75	9/15/2009	Claims patient received office visit	\$250.00	\$82.61
76	12/8/2009	Lists Provider ID as # 445438	\$250.00	\$82.61
77	1/7/2010	Lists Provider ID as # 445438	\$250.00	\$81.99
78	2/4/2010	Lists Provider ID as # 445438	\$250.00	\$81.99
79	4/1/2010	Lists Provider ID as # 445438	\$250.00	\$81.99

AS TO PATIENT # 1006(DH) (AHCCCS ID # A236----6) (COUNTS 80-88)

COUNT	DATE OF SERVICE	NATURE OF FALSE REPRESENTATION	BILLED AMOUNT	PAID AMOUNT
80	1/28/2009	Lists Provider ID as # 445438	\$225.00	\$118.27
81	3/27/2009	Lists Provider ID as # 445438	\$250.00	\$81.45
82	4/24/2009	Lists Provider ID as # 445438	\$250.00	\$81.45
83	5/22/2009	Lists Provider ID as # 445438	\$250.00	\$82.61
84	6/19/2009	Lists Provider ID as # 445438	\$250.00	\$82.61
85	7/20/2009	Claims patient received office visit	\$250.00	\$82.61
86	8/18/2009	Claims patient received office visit	\$250.00	\$82.61
87	1/11/2010	Lists Provider ID as # 445438	\$250.00	\$81.99
88	3/8/2010	Lists Provider ID as # 445438	\$250.00	\$81.99

AS TO PATIENT # 1004(DR) (AHCCCS ID # A530----1) (COUNTS 89-103)

COUNT	DATE OF SERVICE	NATURE OF FALSE REPRESENTATION	BILLED AMOUNT	PAID AMOUNT
89	2/5/2007	Lists Provider ID as # 445438	\$225.00	\$114.12
90	2/20/2007	Lists Provider ID as # 445438	\$225.00	\$114.12
91	3/20/2007	Lists Provider ID as # 445438	\$225.00	\$114.12
92	5/15/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
93	6/13/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
94	10/1/2008	Lists Provider ID as # 445438	\$199.00	\$84.96
95	11/25/2008	Claims patient received office visit	\$199.00	\$84.96
96	12/23/2008	Claims patient received office visit	\$199.00	\$84.96
97	1/21/2009	Lists Provider ID as # 445438	\$225.00	\$114.84
98	3/3/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
99	5/5/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
100	6/2/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
101	7/1/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
102	7/30/2009	Lists Provider ID as # 445438	\$250.00	\$84.96
103	9/25/2009	Claims patient received office visit	\$250.00	\$84.96

AS TO PATIENT # 1009(DB) (AHCCCS ID # 001----3) (COUNTS 104-128)

COUNT	DATE OF SERVICE	NATURE OF FALSE REPRESENTATION	BILLED AMOUNT	PAID AMOUNT
104	9/20/2006	Lists Provider ID as # 445438	\$225.00	\$107.95
105	11/27/2006	Lists Provider ID as # 445438	\$225.00	\$107.95
106	1/18/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
107	2/19/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
108	4/19/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
109	5/17/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
110	6/14/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
111	8/8/2007	Lists Provider ID as # 445438	\$225.00	\$107.95

112	9/5/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
113	10/1/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
114	10/31/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
115	11/30/2007	Lists Provider ID as # 445438	\$225.00	\$107.95
116	3/24/2008	Lists Provider ID as # 445438	\$199.00	\$75.73
117	4/23/2008	Lists Provider ID as # 445438	\$199.00	\$75.73
118	2/2/2009	Lists Provider ID as # 445438	\$199.00	\$75.73
119	2/17/2009	Lists Provider ID as # 445438	\$250.00	\$75.73
120	3/17/2009	Lists Provider ID as # 445438	\$250.00	\$75.73
121	4/15/2009	Lists Provider ID as # 445438	\$250.00	\$75.73
122	4/30/2009	Lists Provider ID as # 445438	\$250.00	\$75.73
123	6/25/2009	Claims patient received office visit	\$250.00	\$75.87
124	7/24/2009	Lists Provider ID as # 445438	\$250.00	\$75.87
125	10/20/2009	Lists Provider ID as # 445438	\$250.00	\$75.87
126	11/17/2009	Lists Provider ID as # 445438	\$250.00	\$75.29
127	1/15/2010	Lists Provider ID as # 445438	\$250.00	\$75.29
128	2/12/2010	Lists Provider ID as # 445438	\$250.00	\$75.29

In violation of Title 18, United States Code, Section 1347 and 2.

COUNT 129

**(Transactional Money Laundering)
18 U.S.C. § 1957(a)**

55. The factual allegations of paragraphs 1 through 54 are re-alleged and incorporated herein by reference.

56. On or about December 5, 2007, in the District of Arizona and elsewhere, Defendant MARILYN CHIRBAN knowingly engaged in a monetary transaction in criminally derived property of a value greater than \$10,000.00, and which was derived from specified unlawful activity, namely conspiracy and health care fraud in violation of Title 18, United States Code, Sections 1349 and 1347 respectively, as alleged in Counts 46-128 of the Indictment,

namely: the use of Check # 1198 drawn from a Bank of America bank account registered to the ANGELO CHIRBAN and MARILYN CHIRBAN and ending in the last four digits 3444, signed by Defendant MARILYN CHIRBAN, in the amount of \$15,000.00, and paid to Mitch Sperte for the purchase of an Arabian horse and horse training.

In violation of Title 18, United States Code, Section 1957(a).

COUNT 130

(Transactional Money Laundering) 18 U.S.C. § 1957(a)

57. The factual allegations of paragraphs 1 through 56 are re-alleged and incorporated herein by reference.

58. On or about January 21, 2008, in the District of Arizona and elsewhere, Defendant ANGELO CHIRBAN, through a business known as ATEN Corporation, knowingly engaged in a monetary transaction in criminally derived property of a value greater than \$10,000.00, and which was derived from specified unlawful activity, namely conspiracy and health care fraud in violation of Title 18, United States Code, Sections 1349 and 1347 respectively, as alleged in Counts 46-128 of the Indictment, namely: the use of Check # 1853 drawn from an M&I bank account registered to the ATEN Corporation and ending in the last four digits 9259, signed by Defendant ANGELO CHIRBAN, in the amount of \$20,195.00, and paid to Legends Cadillac.

In violation of Title 18, United States Code, Section 1957(a).

FORFEITURE ALLEGATIONS

59. The factual allegations of paragraphs 1 through 58 are re-alleged and incorporated herein by reference.

60. Pursuant to 21 U.S.C. § 853, and as a result of committing one or more of the offenses charged in Counts 1-45 of the Indictment, defendants ANGELO CHIRBAN and MARILYN CHIRBAN shall forfeit to the United States, all property, real and personal, that constitutes, directly or indirectly, proceeds, or was derived from or traceable to proceeds from the commission of these drug offenses, as being the proceeds of specified unlawful acts, to wit:

1 21 U.S.C. § 846 (Conspiracy to Distribute Controlled Substances) and 21 U.S.C. § 841 (Illegal
2 Distribution of Controlled Substances).

3 61. Pursuant to 18 U.S.C. § 981(a)(1)(C), and 28 U.S.C. § 2461, and as a result of
4 committing one or more of the offenses charged in Counts 46-128 of the Indictment, defendants
5 ANGELO CHIRBAN and MARILYN CHIRBAN shall forfeit to the United States, all property,
6 real and personal, that constitutes or was derived from proceeds traceable to the commission of
7 these offenses, as being the proceeds of specified unlawful acts, as defined in 18 U.S.C. §
8 1956(c)(7)(F), to wit: 18 U.S.C. § 1349 (Conspiracy to Commit Health Care Fraud) and 18
9 U.S.C. § 1347 (Health Care Fraud).

10 62. Pursuant to 18 U.S.C. § 982(a)(7), and as a result of committing one or more of
11 the offenses charged in Counts 46-128 of the Indictment, defendants ANGELO CHIRBAN and
12 MARILYN CHIRBAN shall forfeit to the United States, all property, real and personal, that was
13 involved in or was derived from proceeds traceable to the commission of these offenses, as being
14 the proceeds of specified unlawful acts, as defined in 18 U.S.C. 982(a)(7) and § 1956(c)(7)(F),
15 to wit: 18 U.S.C. § 1349 (Conspiracy to Commit Health Care Fraud) and 18 U.S.C. § 1347
16 (Health Care Fraud).

17 63. Pursuant to 18 U.S.C. § 982(a)(1), and as a result of committing the money
18 laundering offenses charged in Counts 129-130 of this Indictment, in violation of 18 U.S.C. §
19 1957, defendants ANGELO CHIRBAN and MARILYN CHIRBAN shall forfeit to the United
20 States, all property, real and personal, that was involved in or was derived from proceeds
21 traceable to the commission of that offense.

22 64. Pursuant to 21 U.S.C. § 853(p), as incorporated by 18, U.S.C. § 982(b), and 28
23 U.S.C. § 2461, defendants ANGELO CHIRBAN and MARILYN CHIRBAN, for the charges
24 alleged in this Indictment, and the forfeiture allegations in Paragraphs 59-63 above, shall forfeit
25 substitute property, up to the value of the amounts described above, including a money judgment
26 in the amount of \$4,000,000.00, if by any act or omission of the defendants, the property
27 described above, or any portion thereof, cannot be located upon the exercise of due diligence;
28

1 has been transferred, sold to or deposited with a third party; has been placed beyond the
2 jurisdiction of the court; has been substantially diminished in value; or has been commingled
3 with other property which cannot be divided without difficulty.

4 All in accordance with Title 18, United States Code, Sections 981 and 982(a) and (b); Title
5 28, United States Code, Section 2461; and Rule 32.2, Federal Rules of Criminal Procedure.

6
7 A TRUE BILL

8
9
10 /S/
FOREPERSON OF THE GRAND JURY
Date: December 13, 2011

11
12 ANN BIRMINGHAM SCHEEL
Acting United States Attorney
13 District of Arizona

14
15 /S/
KRISMA M. LANHAM
16 PETER SEXTON
Assistant U.S. Attorneys
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Attachment A

VICTIM HEALTH CARE PROGRAM

Fed. R. Crim. P. 12.4 Disclosure Statement

The Arizona Health Care Cost Containment System (AHCCCS) is the established Medicaid agency for the State of Arizona. AHCCCS provides medical insurance coverage for individuals whose income is too low to meet the costs of necessary medical services. Approximately 70% of the funding for the AHCCCS program comes from the federal government, and approximately 30% of the funding for the AHCCCS program comes from the State of Arizona.

AHCCCS is a "health care benefit program" as defined by 18 U.S.C. § 24.

Physicians and other health professionals can register with AHCCCS to provide services to these individuals. They are assigned a provider identification number to bill for the services they provide. Physicians are paid at 100% of the Health plan allowed amount and mid level staff (Physician Assistants and Nurse Practitioners) are paid at 90% of the health plan allowed amount.

All health care professionals providing services to AHCCCS recipients must be registered with AHCCCS and then credentialed with the health plan. This is to ensure the integrity and the safety of the program.

AHCCCS policy states that services provided by Nurse Practitioners and Physician Assistants must be billed under their own provider registration numbers and they must be credentialed by the health plan.